 	CT OF TEXAS P.O.Box	PROOF OF CLAIM
61288, Houston TX 77208 (Houston Div	rision)	
Name of Debtors	Case Number	
Stage Stores, Inc., a Delaware corporationSpecialty Retailers, Inc., a Texas corporationSpecialty Retailers, Inc. (NV), a Nevada corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-55297 Creditor ID#: Inited States Bankruptcy Court Southern District of Texas
*place an "x" beside the name of the Debtor you are filing a claim against		FILED
Name of Creditor (The person or other entity to whom the debtor owes money or property): Sentinel-Record, Inc	Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement MiC giving particulars.	
Name and address where notices should be sent:		- Cierk
**************************************	Check box if you have never received any notices from the bankruptcy court in this case	
PO Box 580 Hot Springs AR 71902-0580	Check box if the address differs from the address on the envelope sent to you by the	
Account or other number by which creditor identifies debtor:	Check here replaces if this claim amends a prev	viously filed claim, dated:
1. Basis for Claim Goods sold	Retiree benefits as defined in 11 U.S.C. § 1114(a) Wages, salaries, and compensation (Fill out below)	
_X Services performed Money loaned	Your SS#:	
Personal injury/wrongful death Taxes	Unpaid compensation for services performed from $04/01/00$ to $05/30/00$	
Other	(date)	<u>/ 30 / 00</u> (date)
2. Date debt was incurred: April & May, 2000	3. If court judgment, date of	otained:
4. Total Amount of Claim at Time Case Filed: \$ 4,584.64 If all or part of your claim is secured or entitled to priority, also complet Check this box if claim includes interest or other charges in additional charges.	te Item 5 or 6 below.	
5. Secured Claim.	6. Unsecured Priority Claim	
Check this box if your claim is secured by collateral (including a right of setoff).	Check this box if you have an unsecured priority claim	
Brief Description of Collateral:	Amount entitled to priority \$ _ Specify the priority of the claim	
Real Estate Motor Vehicle	Wages, salaries, or commissions (up to \$4,300),* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11	
Other All personal and intangible property of Debtor's Estate	U.S.C. § 507(a)(3)	
Value of Collateral: \$	 Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). Other — Specify applicable paragraph of 11 U.S.C. § 507(a). *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment. 	
Amount of arrearage and other charges <u>at time case filed</u> included in secured claim, if any \$		
the purpose of making this proof of claim.	And the state of t	
8. Supporting Documents: Attach copies of supporting documents, such notes, purchase orders, invoices, itemized statements of running accounts, controvers judgments, mortgages, security agreements, and evidence of perfection of court judgments.	racts,	
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.		
. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		348
Sign and print the name and title, if any, of the creditor or other (attach copy of power of attorney, if any): 07/24/00 6ster Louise Harrel Collocter I:	er person authorized to file this claim 53758 Lowise HARRELL	
Penalty for presenting fraudulent claim: Fine of up to \$500,000		. 18 U.\$.Ç. §§ 152 and 3571.
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